

Health Policies in Schools: The Health Curricula and the Role of the Teacher in Portugal

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Abstract

In Portugal there is a national basic law regarding the education system where all official and private schools are obliged to follow its guidelines. The Secretary of State for Education considers the inclusion in the school educational project issues related to health promotion and education as mandatory and stating the following areas as priorities: nutrition and physical activity, substance use, sexuality/ STIs, including AIDS, violence in schools and mental health. The school's educational project should be designed in accordance with the priorities identified and in articulation with the families of students. To help to achieve these goals, each group of schools has a coordinator who must be the responsible entity in the school for the project and articulate it with health centres to develop actions aimed at the protection and promotion of global health. In this sense, this paper will discuss the health curricula and the role of the teacher in Portuguese schools in the context of European guidelines, and the Schools for Health in the European Network.

Keywords: Health curricula; Role of teacher; Portuguese schools; Schools for Health in the European Network

Introduction

In 1986, Portugal participated and rectified the Ottawa Charter which advocates for health in all contexts, since health promotion is not the sole responsibility of the health service, but all sectors including education which have the responsibility for creating overall wellbeing.

In Portugal there is a national Basic Law Regarding the Education System, where all official and private schools are obliged to follow its guidelines. Since 1999, all schools are considered by the law as health promoting schools which involve the planning, development and evaluation of a school educational project that must follow the core values of the Schools for Health in the European Network – The SHE network: equity, sustainability, inclusion, empowerment and action competence, and democracy.

Portuguese schools are committed to apply the SHE pillars in their functioning, which means the development of a global school approach to health which involves coherence between the school's policies and practices in the following areas which is acknowledged and understood by the whole school community (Buijs, Jociutė, Paulus, and Simovska 2009, 106):

- a participatory and action-oriented approach to health education in the curriculum;
- taking into account student's own concepts of health and well-being;
- developing healthy school policies;

- developing the physical and social environment of the school;
- developing life competencies;
- making effective links with the home and the community;
- making efficient use of health services.

Within the Portuguese government, there exists a General Directorate of Innovation and Curricular Development (GDICD) within the General Directorate of Education, which belongs to the Ministry of Education and Science. The GDICD is the entity responsible for the creation of the legal, pedagogic and didactic instruments which allows schools and teachers to play effective roles. The GDICD operates in several areas, namely in health education in schools, and is responsible, among other aspects, for the design of programs and guidelines for the various subjects and non-subject curricular areas, as well as for the activities for the enrichment of the curriculum and for the management of projects that support the curriculum and the pedagogical organization of schools.

The GDICD, through the Nucleus for Health Education and School Social Action (NHessa) is responsible for supporting, monitoring, developing and evaluating the activities of health promotion and education in schools, within the priority areas of intervention. It is also the role of the GDICD/NHessa according to its website, to contribute to the development of policies on health promotion and education and train teachers in the following priority areas of intervention: nutrition education and physical activity; prevention of the consumption of psychoactive substances; sexuality and sexually transmitted infections; and within the area of mental health, violence prevention in schools.

According to the GDICD/NHessa, in its website in the school context, health education means providing children and youths with knowledge, attitudes and values which help them to make appropriate choices, and takes adequate decisions to their health and their physical, social and mental well-being as well as the health of those around them, thereby providing them with an active role. In this sense, following the core values of the Schools for Health in the European network, the General Directorate of Innovation and Curriculum Development assumes as its role: to track, monitor and evaluate activities for health promotion and education in schools; to contribute to the definition of policies regarding health promotion and education adapting and following the policies of WHO and the Council of Europe (SHE) in the field of health education, in which the Ministry of Education is represented.

Within this context, a brief summary of the guidelines set forth by the Portuguese Government for schools to develop health promotion and education in the several priority areas of intervention will be presented.

Nutrition Education and Physical Activity

In order to promote nutrition and physical activity in schools, the GDICD/NHessa established that meals and food supply in schools must follow the dietary principles of variety and quality, whose definition is the responsibility of the Directorate General for Innovation and Curriculum Development. To promote health in this area, the objectives of the GDICD/NHessa according to its website, are the following: to improve the overall health of young people; to reverse the trend of increasing disease profiles associated with poor nutrition; and to promote young people's health, specifically with regards to healthy eating and physical activity.

In this sense, Order no. 1242/2009 of 12th October (Ministérios da Agricultura, do Desenvolvimento Rural e das Pescas, da Saúde e da Educação de Portugal 2009), establishes the Regulation of the School Fruit Scheme (RSF), defining the rules of complementary national aid for the scheme of the distribution of fruit and vegetables and their derivatives to students of the 1st cycle of basic education (6 to 9 years) in schools, under the European system of distribution of fruit in schools. This Law integrates the accompanying measures to promote the consumption of fruit, namely (Ministérios da Agricultura, do Desenvolvimento Rural e das Pescas, da Saúde e da Educação de Portugal 2009, 7482):

- a) Organization of visits to farms, markets and horticultural plant farms;
- b) Installation of flower beds in schools, for the establishment of a connection to their origin;
- c) Provide materials (books, notebooks of activities, contests, games, cards or data sheets with the names of fruits or vegetables, CDROM information);
- d) Provision of leaflets for children, captivating their curiosity about the subject;
- e) Providing small bag of seeds for sowing by children;
- f) Performance or display of children's videos or films depicting the program;
- g) Achievement of leisure: theatres, dances, songs and poems, depicting the program;
- h) Carrying out activities that depend on and contribute to the institutional website of the RSF;
- i) Providing books for teachers and other educational material for teaching children the necessary habits of healthy-feeding;
- j) Awarding prizes or rewards to encourage the consumption of products;
- l) Initiatives aimed at enhancing the RSF from the aggregated family of children.

Prior to this law, Circular no. 11/DGIDC/2007 established recommendations for school snack bars (Ministério da Educação – DGIDC de Portugal 2007a) and Circular no. 14/DGIDC/2007 (Ministério da Educação - DGIDC de Portugal 2007b) and Circular no. 15/DGIDC/2007 (Ministério da Educação - DGIDC, Portugal 2007c) for school cafeterias. It was defined that the school snack bars are complementary services to the school cafeteria and should therefore provide healthy between-meal snacks to students and other members of the educational community, and reinforcing nutrition education in the curriculum.

Therefore, in order to contribute to a proper nutritional education, the Ministry of Education published a book (Baptista 2006) for a healthy food offer, aiming at nutrition education in the school. This book recommends and provides effective guidelines regarding eating habits in schools, with an explanatory component in the selection of some foods over others by contextualizing the different options in a wider context: the concerns that Portugal shares with nations and organizations in Europe and the world. With these guidelines, the Ministry of Education intended to guide schools and their leaders to offer healthy food in schools and to clarify the educational community of the guiding principles for the food supply in school snack bars. The Director-General for Innovation and Curriculum Development explained that this referential aims to encourage dialogue among teachers, students and families, because the approach that requires new behaviours always demand debate, discussion and cooperation.

This framework developed by the Ministry of Education was primarily directed at schools with the objective of contributing to the following aspects (Baptista 2006, 7):

1. Improving the overall health of young people;
2. Reversing the increasing trend of disease profiles which is translated into an increased incidence and the prevalence of diseases such as obesity, diabetes type II, tooth decay, heart disease and others;
3. Overcoming nutritional needs of the student population most in need, providing them with nutrients and energy necessary for good cognitive performance;
4. Promoting young people's health through health education, specifically in respect to Healthy Eating and Physical Activity.

A leaflet on "School snack bars - healthy food" with advice for parents about healthy and nutritionally appropriate food for specific ages of students is available at the school snack bars (foods to promote, to limit and not make available) and was also published. For students of 1st (1st to 4th years) and 2nd (5th to 7th years) cycles, the Ministry of Education with the collaboration of the Portuguese Catholic University and other international partners produced the didactic material: "Food Security for the Youngest: Support Materials for Teachers of Basic Education", funded by the program Leonardo Da Vinci of the European Commission. The material is organized into two levels: For teachers of the 1st cycle it includes: a "teacher's Guide" that introduces the presentation of the content and activities, four presentations of content to the students (The discovery of the invisible world; The invisible world in food; From supermarket to the home; It's time to eat!); twelve activities, and a game. For teachers of the 2nd cycle (5th to 7th years), together with the teacher's guide and the introduction and presentation of the content and activities, there are five contents for students (The world of microorganisms; Food contamination and its prevention; The factory: a large kitchen; How to buy and store food; We can cook!), ten activities and three questionnaires.

The concerns of the balance of energy between intake and expenditure are essential to health. Therefore, it only makes sense to talk about food, when speaking also about physical activities. The GDICD/NHESSA has always valued physical activity as a constant target for health promotion, not only in the aspect of physical education as a curricular subject, and part of the "School Sports Area", but also in the perspective of the movement of recreational and leisure activities. Following the guidelines of the GDICD/NHESSA according to its website, the school is responsible for the development of skills in physical activities in young people, helping them to develop a taste for this subject and creating spaces and time where young people can spend energy in a safe manner. Furthermore, other agencies, including local authorities, are encouraged by the GDICD/NHESSA to create infrastructures that will enable young people and respective families to feel safe in the route between home and school in order to encourage the use of bike paths or pedestrian accesses routes.

The Prevention of the Consumption of Psychoactive Substances

According to the GDICD/NHESSA, the information and prevention of the consumption of alcohol, tobacco and illicit drugs in schools are issues that are part of the National Curriculum

of Basic and Secondary Education and can be addressed and developed in different disciplinary and non-disciplinary areas of the curriculum, like Citizenship Education, activities or projects that promote the enrichment of the curriculum, the development of healthy life skills and the building of attitudes based on active and responsible citizenship.

The guidelines of the GDICD/NHESSA in its website, define that throughout compulsory education, it is essential that students: recognize the dangers of alcohol, tobacco and other drugs in order to maintain a healthy lifestyle; identify and explain the consequences of drug use and its effects on the life process and social relationships; characterize risk behaviour (e.g. tobacco, alcohol and other drug consumption) to the physical or psychological integrity of the individual and explain some of its main consequences. The activities conducted in and by basic and secondary schools, framed by the school's educational project and the class curricular project, contribute to increase the level of information/ awareness on psychoactive substances and the acquisition/ development of healthy life skills and critical attitudes regarding risky situations by children and youths.

To promote healthy lifestyles and conditions, taking into account this problem, the National Assembly recommended twelve points for the Government to consider in the fight against alcoholism, in particular the following (Resolution of the Assembly of the Republic no. 76/2000 of 18th November):

(...) 2 – to develop an information project at the national, regional and local levels, focusing on schools and families, aiming at alerting the population to the risks and damage due to excessive alcohol intake;

3 – to promote a national campaign to improve awareness regarding excessive alcohol consumption, with messages and resources for specific target groups like pregnant women, children, adolescents, and heavy alcohol consumption;
(...)

5 – to equate the possibility of raising the legal age to permit the consumption of alcoholic beverages; (...)

7 – to regulate or prohibit the advertising of alcoholic beverages, especially with regards to sports associations or other specific activities aimed at young people;

8 – to regulate the functioning of bars and cafes near schools; (...) (Assembleia da República de Portugal 2000, 6584)

In the same month, the Resolution of the Council of Ministers no. 166/2000 of November 29th approved the Plan of Action Against Alcoholism, which is an integral part of this resolution. This plan highlights the main guidelines for action and measures to be taken to promote health and health education, developing and supporting programs in the area of alcohol consumption that include the development of public information campaigns, school curricula approach and awareness raising and training for specific high risk groups, that calls attention to the excessive, inappropriate or inconvenient consumption of alcoholic beverages, particularly in terms of (Presidência do Conselho de Ministros de Portugal 2000, 6840):

(...) b) Induction of instability and emotional and organic disturbances in children and young people with negative interference in school learning and intellectual ability in general, and adaptive capacity in the social environment, either by

integrating families with excessive consumption or alcohol dependence or by consuming alcoholic beverages;

c) Increase of disturbances in family relationships, with emphasis on domestic violence, the abuse of children and social violence;

d) Facilitation of risky behaviours among consumers and those around them especially in connection with acute alcohol intoxication particularly in young people, such as: aggressive and violent attitudes; dangerous driving of vehicles; unprotected and/ or unwanted sex, and with casual partners; increased susceptibility to drug abuse and eating disorders, suicide attempts and suicide; (...)

This Resolution, amended by Decree-Law no. 332/2001 of 24th December (Presidência do Conselho de Ministro, Portugal 2001) limited advertising rules, for example: by extending the period of prohibition of advertising on television and radio of any type of alcohol between 7 am and 10:30 pm; including the labelling of all alcoholic beverages with warning messages regarding the possible negative effects by its consumption, especially by children, pregnant and nursing mothers and emphasizing that excessive, inappropriate or inconvenient consumption seriously damages health; establishing that marketing campaigns and advertising of any events involving minors, including sports, cultural, recreational or others, should not show or make any reference, implicit or explicit to a brand or brands of alcoholic beverages, and prohibiting sponsorship by alcohol companies to any sport, as well as cultural and recreational activities, aimed at minors. This Law also defined, among other things, that it is prohibited to sell and consume on the premises of sale, alcoholic beverages to individuals under 18; reinforced the control measures regarding the sale and consumption in restaurants, cafés or other establishments frequented by youths under the age of 18, and established a perimeter around the schools and any other settings aimed at children and young people within which the installation of new drinking establishments or any structures intended for the sale of alcoholic beverages will be prohibited. Decree-Law no. 9/2002 of 24th January (Presidência do Conselho de Ministro de Portugal 2002), amended previous Decree-Laws, establishing surprisingly, that it is forbidden to sell or for commercial purposes make available alcoholic beverages in public places to individuals under the age of 16 instead of 18, as was previously legislated!

Regarding tobacco, the Portuguese Government, by Decree no. 25-A/2005, 18th November (Ministério dos Negócios Estrangeiros de Portugal 2005), adopted the Framework Convention of the World Health Organization for Tobacco Control, adopted in Geneva by the 56th World Health Assembly on May 21st, 2003. In 2006, by Decree-Law no. 14/2006 of January 20th (Ministério da Saúde de Portugal 2006) updating Decree-Law no 226/83, May 27th, Portugal updated its rules on advertising and sponsorship of tobacco products, transposed into a national law by Directive no. 2003/33/EC of the European Parliament and the Council of 26th May on the approximation of laws, regulations and administrative provisions of member states in this matter. This law is based on the fact that tobacco consumption in Portugal is also one of the major determinants of health therefore the Government is declaring the fight against the consumption of tobacco a priority area of action, included in the broader objective of disease prevention and health promotion by encouraging the adoption of healthy behaviours and lifestyles. In this sense, this Law established that the use of tobacco in the following locations is forbidden: in units that

provide health services; in schools, including classrooms, study, reading or meeting rooms, libraries, gymnasiums and cafeterias; in places for minors (16 or under), in concert halls and other indoor sports and similar closed arenas (Article 2, paragraph 1). In these sites, it may be permitted to use tobacco in areas specifically designated for smoking, which should not include areas where sick people, individuals under 16, pregnant or nursing mothers and sports people have access (Article 2, paragraph 2). It is also forbidden to smoke on urban public transport and on suburban and interurban public transport when the duration of the travel is less than one hour (Article 3, paragraph 1). All forms of tobacco advertising through national advertising channels or based in Portugal are forbidden (Article 6, paragraph 1) and all packages of cigarettes intended for consumption in the national territory shall include: messages that alert consumers to the harmful effects and discourage tobacco consumption and showing for the content of each cigarette, the nicotine levels and the classification of "low", "medium" or "high" references in the respective levels (Article 8, paragraph 1).

On January 1st, 2008, Law 37/2007 of 14th August, the Tobacco Act (Assembleia da República de Portugal 2007), adopted rules for the protection of citizens from involuntary exposure to tobacco smoke and introduced measures to reduce the demand related to dependence, and cessation of its consumption was implemented at a national level. This Act reinforces the prohibition of smoking on urban and on suburban and interurban public transports and in certain places, including schools, and determines that it is prohibited to smoke in places intended for children under 18, including kindergartens, nurseries and other childcare establishments and also, the sale of tobacco products to minors under the age of 18.

To promote health through the prevention of consumption of psychoactive substances, the GDICD/NHESSA in its website has released a set of documents and educational resources for the prevention of the use of psychoactive substances in schools, namely a book (Sousa, Pinto, Sampaio, Nunes, Baptista, and Marques 2007) that aims to provide schools and the entire educational community with technical and scientific well-founded information on the consumption of alcohol, tobacco and illicit drugs and provide arguments to carry out reflection/ action for their prevention in schools. The GDICD/NHESSA in its website also provided schools with the "Annual Report 2011 on The Evolution of The Phenomenon of Drugs In Europe" (Observatório Europeu da Droga e da Toxicodependência 2011), the "Action Plan on Drugs and Drug Addiction 2009-2012" (Instituto da Droga e da Toxicodependência 2010 a), and the "National Plan for Reducing Problems Linked to Alcohol 2010-2012" (Instituto da Droga e da Toxicodependência 2010 b) and encouraged them to involve students in an interactive website, with content related to the issue of preventing the use of psychoactive substances, entitled Juvenile Website: Are you part of it? (Sítio juvenil: tu alinhas?) (<http://www.tu-alinhas.pt/InfantoJuvenil/homepage.do2>).

Sexuality Education in Schools and the Prevention of Sexually Transmitted Infections

Sexuality education in schools is mandatory and is intended for all institutions of basic and secondary public, private and cooperative schools in the national territory with agreements with the Portuguese Government. According the GDICD/NHESSA, in its website, sexuality education in the school community should: contribute to the improvement of affective and sexual relationships among young people; contribute to the reduction of possible adverse events arising from sexual behaviour, such as early pregnancy and infections (STIs); and to contribute to informed decision-making in the area of health education and sexuality

education.

The website of the GDICD/NHESSA has also been providing schools with the legislation on sexuality education in the last five years, and reports prepared by the Working Group on Sexuality Education created by Order no. 19 737/2005 (2nd series), 15th June 2005 (Ministério da Educação-Gabinete da Ministra de Portugal 2005) in order to propose the parameters of the program guidelines for sexuality education in schools.

In 2009, Law no. 60/2009 of 6th August (Assembleia da República de Portugal 2009, 5097) established the following guidelines for sexuality education:

- a) The valuation of sexuality and affection among people in individual development, respecting the pluralism of existing conceptions of the Portuguese society;
- b) The development of young people's competencies that enable them to make safe and informed choices regarding sexuality;
- c) The improvement of affective-sexual relationships of young people;
- d) The reduction of negative consequences of risky sexual behaviours, such as unwanted pregnancy and sexually transmitted infections;
- e) The ability to protect oneself against all forms of exploitation and abuse;
- f) The respect for the differences between people and different sexual orientations;
- g) The value of informed and responsible sexuality;
- h) The promotion of gender equality;
- i) The recognition of the importance of participation in the educational process of parents, students, teachers and health professionals;
- j) The scientific understanding of the functioning of biological reproductive mechanisms;
- l) The elimination of behaviours based on sexual-discrimination or violence based on gender or sexual orientation.

This Law also determines that in primary education, sexuality education must be integrated within the health education area in the non-subject curricular areas, namely in Citizenship Education, and in secondary education which falls within the scope of health education in subject and non-subject areas, in accordance with the posterior regulation by the Government. In 2010, Ordinance no. 196-A/2010 of April 9th (Ministérios da Saúde e da Educação de Portugal 2010) established the system of the implementation of sexuality education in schools defining that in either basic or secondary education, the content of sexuality education is developed in the context of health education in the non-subject areas and should respect the inherent transversal contents of the various subjects which they are integrated in. The content of sexuality education must attain the following minimum objectives for the 1st Cycle of Basic Education (1st to 4th years):

1st year: notion of the body; the body in harmony with nature and its social and cultural environment; notion of the family; differences between boys and girls; and body protection concepts of limits, e.g. saying no to abusive approximation;

2nd year: in addition to the content included in the programs of the "Physical Environment" area, the teacher should explain to students, issues and

questions that arise naturally, responding in a simple and clear way;

3rd and 4th years: in addition to the contents included in programs of the “Physical Environment” area, the teacher can develop themes that lead students to understanding the need to protect their own body to defend themselves against possible physical abusive approaches, advising them that if they encounter any questions or problems, they are entitled to ask for help from people who they can rely on such as the family or school. (Ministérios da Saúde e da Educação, Portugal 2010, 1170(3)-1170(4))

This program of the 1st cycle encourages teachers to provide students with a learning environment that develop students’ ability to construct their own sexual and gender identities and simultaneously, to solve any problems connected with their own psychosexual development.

In the programs of the 2nd and 3rd cycles, the principal concern is to give continuity to the program of the 1st cycle by continuing to explore the contents/problems and abilities to be developed in a spiral approach, and to promote the sexual and the reproductive health of students taking in account the awakening of their sexual maturity, which means: the new biological capacity of reproduction; the re-definition of their self-image and the configuration of their sexual desire. The content established by the Ministries of Education and Health for the 2nd Cycle (5th and 6th years) and 3rd Cycle of Basic Education (7th to 9th years) are the following (Ministérios da Saúde e da Educação de Portugal 2010, 1170(3)-1170(4):

2nd Cycle

- Puberty- biological and emotional aspects; body transformation, secondary sexual characteristics; normality, importance and frequency of their biopsychological development, diversity and respect;
- Sexuality and gender;
- Human reproduction and growth, contraception and family planning; understanding the menstrual cycle and ovulation;
- Prevention of sexual abuse and abusive approaches;
- Ethical dimensions of human sexuality.

3rd Cycle

- Ethical dimensions of human sexuality; understanding sexuality as one of the most sensitive component parts of the individual in the context of a life project that integrates values (e.g., affection, tenderness, growth and emotional maturity, ability to handle frustrations, appointments, voluntary abstinence) and ethical dimensions;
- General understanding of the physiology of human reproduction, understanding the menstrual cycle and ovulation; understanding the use and accessibility of existing contraceptives methods and, briefly, their mechanisms of action and tolerability (side effects);
- Understanding the epidemiology of major STIs in Portugal and worldwide (including HIV infection/Human immunodeficiency virus and HPV2/human papillomavirus, and its consequences) as well as their methods of prevention;
- To know how to protect ones own body, preventing violence and physical and

- sexual abuse and sexual risky behaviour, assertively refusing sexual and emotional pressures;
- Knowledge of rates and trends in maternity and paternity in adolescence and understanding their respective significance; knowledge of rates and trends regarding abortion, its consequences and its meaning;
- Understanding the concept of parenthood as part of a healthy and responsible sexual and reproductive health; and
- Prevention of abuse and abusive approaches.

In secondary school education (10th to 12th years), the program continues to be concerned with the progressive deepening of the biological, psychological, social and ethical dimensions of sexuality, however, it is more focused on the ethical aspects of human sexuality and in the development of a critical thinking regarding students' own sexuality and those of the community. The contents established by the Ministries of Education and Health are the following (Ministérios da Saúde e da Educação de Portugal 2010, 1170(3)-1170(4)):

- The ethical understanding of human sexuality: without prejudice to the content already listed in the 3rd cycle, where deemed necessary, shall return to the previous themes/problems discussed because experience shows the advantages of re-addressing them with students who could already have started to be sexually active at this stage of their studies. The approach must be accompanied by a reflection on attitudes and behaviours of adolescents in the present;
- Understanding and determination of the menstrual cycle in general, with particular attention to identifying when the ovulatory period is, depending on the characteristics of menstrual cycles;
- Statistical information, e.g. on: the age of the onset of sexual intercourse in Portugal and the EU; pregnancy and abortion rates in Portugal; contraceptive methods available and used; safety provided by different methods; reasons that prevent the use of appropriate methods;
- Physical consequences and psychological and social aspects of maternity and paternity in teenage pregnancy and abortion;
- Diseases and sexually transmitted infections (such as HIV infection and HPV) and their consequences; prevention of sexually transmitted diseases;
- Prevention of abuse and abusive approaches.

In accordance with the limits defined in Article 5 of the Law 60/2009 of 6th August (Assembleia da República de Portugal 2009), the workload of sexuality education cannot be less than six hours for the 1st and 2nd cycles of basic education and not less than twelve hours for the 3rd cycle of basic and secondary education, distributed evenly over the year by the school. They are also obliged to adhere to the defined time space of the curriculum of sexuality education in the time spent on the subjects and extracurricular actions that relate to this area.

Mental Health - Violence Prevention in Schools

In Portugal, according to GDICD/NHESSA in its website, the prevention of violence in schools as part of mental health promotion and education of youths, is considered an inevitable approach in schools, since it cuts across all other priority areas of health education. The Portuguese National Mental Health Plan (2007-2016) approved in the Resolution of the Council of Ministers no. 49/2008 of March 6th (Presidência do Conselho de Ministros de Portugal 2008) argues that educational institutions must implement validated prevention programs, targeted to specific areas and most vulnerable groups. In the framework of the intersectorial articulation of this mental health plan, prevention activities for mental disorders and mental health promotion in schools are encouraged with the aim of reducing risk factors and promoting protective factors, reducing the incidence and prevalence of mental illness and minimizing the impact of disease on people, families and societies. In the National Mental Health Plan, the following promotion and prevention strategies are prioritized (Presidência do Conselho de Ministros de Portugal 2008, 1405):

Early childhood programs, including prenatal counselling, early intervention, parental training, prevention of domestic violence and child abuse, family interventions and conflict resolution;

Education programs on mental health at school age, the sensitization of teachers, youth violence prevention, counselling for children and adolescents with specific problems, drug abuse prevention programs, personal and social development, prevention of suicide and eating disorders.

In this ambit, the GDICD/NHESSA on its website established the following objectives for this area of health promotion and education in schools: to identify the various types of behaviours related to violence; to support awareness raising and promotion of mental health; and to promote continued knowledge-based intervention in partnership with relevant institutions in the field of mental health. Therefore, in order to support schools in the planning of their projects in this area, schools were provided with a book entitled: Violence in the School Context (Matos et al. 2010), which became a benchmark for supporting work in schools, in order for teachers to understand the phenomenon and to identify prevention strategies to develop in the school context. This book aims to help teachers to (Matos et al. 2010, 7):

- describe different types of violence;
- identify factors associated with the phenomenon of violence in schools;
- identify risk factors and protective factors associated with violent behaviour;
- describe individual and social factors of protection and risk of violence in children and adolescents;
- describe different types of approaches to intervention with antisocial behaviours;
- characterize different perspectives on juvenile delinquency;
- identify strategies of violence prevention developed in schools;
- identify responses of school to bullying/teasing among peers;
- describe prevention programs on violence based on the promotion of personal and social skills;
- identify, intervene and evaluate to facilitate the prevention of violence.

Taking into account the needs of mental health promotion in the Portuguese society, and since Portuguese students are in school about two-thirds of their day, integrating violence

prevention in the design of health promotion and education in the school setting becomes central to their health promotion.

Final Considerations

In Portugal, the reorganization of the educational system in 1986, ten years after the end of the dictatorship in the country, created the necessary conditions for an integrated approach to health education in the school environment, since non-subject cross curricular areas emerged in the school curriculum and health education among other areas of personal and social development were included in them. Currently each group of schools has a teacher-coordinator and an interdisciplinary team of teachers involved in health and sexuality education. This class project should be compulsorily included in the educational project of the Group of Schools, respecting the guidelines established by their General Council after hearing from student and parents' associations and teachers.

Portugal has been a member of the European Network of Health Promoting Schools (ENHPS) since 1994. The national network started with ten schools of all school levels and four health centres and in 1997, the challenge to schools to join the process of enlarging the National Network of Health Promoting Schools, according to the criteria set out by the ENHPS: democracy, equity, empowerment and action competence, school environment, curriculum, teacher training, measurement of success, collaboration, communities and sustainability was launched.

Since 2005 Health Education is compulsory for all schools in Portugal, and exist the following priority areas of intervention which have been worked on within the principles of health promoting schools: nutrition education and physical activity; prevention of consumption of psychoactive substances; sexuality and sexually transmitted infections; and within the area of mental health, violence prevention in schools.

However, there are some constraints that have emerged. First of all, despite the effort that has been made in the in-service teacher training on health education, it has not been sufficient to cover all teachers and all of their training necessities in this pedagogical and content area. Other constraints are the resistance by teachers to work on a transversal area for which they have not been trained, to work collaboratively, to develop their capacity to reflect in and on action and to carry out the assessment of their own health education projects.

Therefore, academic research on theory and practice in this area continue to be a challenge for researchers who are concerned with the sustainable increase of health promotion and education in the school communities.

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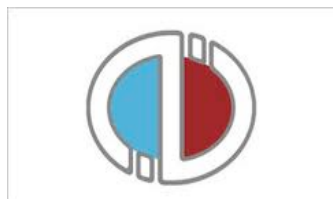
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